



*Washington*  
**Secretary of State**  
SAM REED

REVISED

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March 22, 2007

State HAVA Funding Reports  
U.S. Election Assistance Commission  
1225 New York Avenue, NW – Suite 1100  
Washington, DC 20005

Dear Commissioners:

Please find attached the revised SF 269 and narrative report for calendar year 2005 on HAVA Title I, Section 102 funds as requested by your letter dated January 10, 2007. If you have any questions regarding any information provided herein, please contact Lori Guerrero at 360-902-4169 or [lguerrero@secstate.wa.gov](mailto:lguerrero@secstate.wa.gov).

Sincerely,

Lori Guerrero  
HAVA Coordinator

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U.S. ELECTION ASSISTANCE  
COMMISSION

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# HAVA TITLE I FUNDS

## Section 102

### Washington State Narrative Report Calendar year January 1 - December 31, 2005 Analysis and description of activities

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Washington State received \$6,799,430.00 under Title I, section 102 of the Help America Vote Act. Funds provided under this section may only be used for the replacement of punch card or lever voting systems. Washington has sixteen counties that qualify for punch card replacement under this section.

The state was not able to meet the January 1, 2004 punch card replacement date and applied for a waiver. The state has ensured that all of the punch card voting systems in qualifying precincts in Washington State will be replaced in time for the first election for Federal office held after January 1, 2006.

In accordance with HAVA, and Section 3 and Appendix G of our State plan, \$1,610,789 was spent on punch card replacement costs for the following counties:

1. Asotin County - \$159,873
2. Franklin County - \$265,741
3. Mason County - \$1,455
4. Stevens County - \$150,091
5. Thurston County - \$465,603
6. Whatcom County - \$568,027

#### Number and type of articles of voting equipment.

##### **1. Asotin County – Grant funds were awarded for the following:**

- 3 eSlate 3000 Disability Access Units
- 2 central count tabulators

**2. Franklin County** – A grant was awarded for 10 AVC Edge disability voting devices and two (2) - four hundred – C Optech tabulators from Sequoia Voting Systems. HAVA only paid 58% (\$265,741.18/\$459,000) of the grant costs in CY05, Equipment attributable to HAVA for this report is as follows:

- 6 AVC Edge I Voting Devices
- 1 - 400C 3.00/WinETP (tabulator)

3. **Mason County** – Funds were not spent on articles of voting equipment in CY05. \$1,455 of the grant award included training and voter education for the new system. We received advice from the EAC in July 2006, stating that only voting equipment was eligible for Section 102 funding. Therefore, in CY 2006, the report will reflect that this cost was removed from Section 102 funding.
4. **Stevens County** – A grant was awarded for 4 eSlate DAUs and 2 scanners/tabulation equipment from HART InterCivic. HAVA paid 62% (\$150,090.54/\$241,000) of the grant costs in CY05, Equipment attributable to HAVA for this report is as follows:
  - 2.5 eSlate 3000 Disability Voting Units
  - 1.2 scanners/tabulators
5. **Thurston County** – Grant funds were awarded for the following:
  - 5 M650 central tabulators
  - 3 M100 precinct tabulators
6. **Whatcom County** – Grant funds were awarded for the following:
  - 3 four hundred – C Optech tabulators from Sequoia Voting

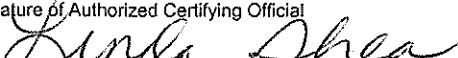
**Interest** – Interest earned during calendar year 2005 is 145,860.

# FINANCIAL STATUS REPORT

(Long Form)

**CORRECTED per EAC direction 1/10/07**

(Follow Instructions on previous pages and next page)

1. Federal Agency and Organizational Element to Which Report is Submitted. <b>Elections Assistance Commission</b>		2. Federal Grant or Other Identifying Number Assigned By Federal Agency <b>Title 1, Section 102</b>		OMB Approval No. <b>0348-0039</b>	Page 1 of <b>1</b> Pages
3. Recipient Organization (Name and complete address, including ZIP codes) <b>Office of the Secretary of State, Elections Division PO Box 40229 Olympia, WA 98504-0229</b>					
4. Employer Identification Number <div style="background-color: black; width: 150px; height: 1.2em;"></div>		5. Recipient Account Number or Identifying Number <b>CFDA #39-011</b>		6. Final Report Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
8. Funding Grant Period (See instructions) From: (Month, Day, Year) <b>4/23/03</b>		To: (Month, Day, Year) <b>Until Disbursed</b>		7. Basis Cash <input type="checkbox"/> Accrual <input type="checkbox"/> To: (Month, Day, Year) <b>December 31, 2005</b>	
9. Period Covered by This Report From: (Month, Day, Year) <b>January 1, 2005</b>					
10. Transactions:					
	I Previously Reported	II This Period	Cumulative		
a. Total outlays	543,301.00	1,610,789.00	2,154,090.00		
b. Refunds, rebates, etc.					
c. Program income used in accordance with the deduction alternative					
d. Net outlays (Line a, less the sum of lines b and c)	543,301.00	1,610,789.00	2,154,090.00		
Recipient's share of net outlays, consisting of:					
e. Third party (in-kind) contributions			0.00		
f. Other Federal awards authorized to be used to match this award			0.00		
g. Program income used in accordance with the matching or cost sharing alternative			0.00		
h. All other recipient outlays not shown on lines e, f, or g.			0.00		
i. Total recipient share of net outlays (sum of lines e, f, g, and h)			0.00		
j. Federal share of net outlays (line d less line i)	543,301.00	1,610,789.00	2,154,090.00		
k. Total unliquidated obligations			0.00		
l. Recipient's share of unliquidated obligations			0.00		
m. Federal share of unliquidated obligations			0.00		
n. Total Federal share (sum of lines j and m)	543,301.00	1,610,789.00	2,154,090.00		
o. Total Federal funds authorized for this funding period			7,080,324.00		
p. Unobligated balance of Federal funds (Line o minus line n)			4,926,234.00		
Program income consisting of:					
q. Disbursed program income shown on lines c and/or g above					
r. Disbursed program income using the addition alternative					
s. Undisbursed program income					
t. Total program income realized (Sum of lines q, r, and s)					
11. Indirect Expenses					
a. Type of Rate (Place "X" in appropriate box)					
<div style="display: flex; justify-content: space-around;"> <span>Provisional</span> <span>Predetermined</span> <span>Final</span> <span>Fixed</span> </div>					
b. Rate		c. Base		d. Total Amount	
				e. Federal Share	
12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation Line O includes \$280,894 total interest earned on funds as of December 31, 2005. Interest earned for the current reporting period is \$145,860.					
13. Certification: I certify to the best of my knowledge and belief that this report is correct and complete and that all outlays and unliquidated obligations are for the purposes set forth in the award documents.					
Typed or Printed Name and Title <b>Linda Shea, Financial Services Manager</b>				Telephone (area code, number and extension) <b>(360) 586-1171</b>	
Signature of Authorized Certifying Official 				Date Report Submitted <b>3-22-07</b>	